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PTO/SB/97 (08-03)

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Patricia A. Verlangieri

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Serial No.: 09/873,638

Docket No.: PA000010

Examiner: Hanh Van Tran

Transmittal Form (2 Copies - 2 Pages)

Fee Transmittal Form (2 Copies - 2 Pages)

Petition for Extension of Time (2 Copies - 2 Pages)

Appeal Brief (7 Pages)

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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/873,638	<b>RECEIVED CENTRAL FAX CENTER DEC 09 2005</b>
	Filing Date	June 4, 2001	
	First Named Inventor	Jisung Woo	
	Art Unit	3637	
	Examiner Name	Hanh Ven Tran	
Total Number of Pages In This Submission	Attorney Docket Number	PA000010	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Thomson Licensing Inc.		
Signature	<i>Patricia A. Verlangieri</i>		
Printed name	Patricia A. Verlangieri		
Date	December 9, 2005	Reg. No.	42,201

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Signature	<i>Patricia A. Verlangieri</i>
Typed or printed name	Patricia A. Verlangieri
Date	December 9, 2005

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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/873,698
	Filing Date	June 4, 2001
	First Named Inventor	Jisung Woo
	Art Unit	3637
	Examiner Name	Hanh Van Tran
Total Number of Pages In This Submission	Attorney Docket Number	PA000010

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Thomson Licensing Inc.		
Signature	<i>Patricia A. Verlangeri</i>		
Printed name	Patricia A. Verlangeri		
Date	December 9, 2005	Reg. No.	42,201

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	Patricia A. Verlangeri	Date	December 9, 2005

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**FEE TRANSMITTAL  
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 950

Complete if Known

Application Number	09/873,638
Filing Date	June 4, 2001
First Named Inventor	Jisung Woo
Examiner Name	Hanh Van Tran
Art Unit	3637
Attorney Docket No.	PA000010

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Account  
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07-0632

Deposit  
Account  
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The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☐ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	780	2001	385	Utility filing fee	
1002	350	2002	170	Design filing fee	
1003	550	2003	265	Plant filing fee	
1004	780	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$ 0)

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	0	0	0
Multiple Dependent	0	0	0

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	43	Independent claims in excess of 3	
1203	300	2203	145	Multiple dependent claim, if not paid	
1204	88	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$)

\*\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)**

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130		2051	66		Surcharge - late filing fee or oath	
1052	80		2052	25		Surcharge - late provisional filing fee or cover sheet	
1053	130		2053	130		Non-English specification	
1812	2,520		1812	2,520		For filing a request for reexamination	
1804	920*		1804	920*		Requesting publication of SIR prior to Examiner action	
1806	1,840*		1806	1,840*		Requesting publication of SIR after Examiner action	
1251	110		2251	55		Extension for reply within first month	
1252	430		2252	210		Extension for reply within second month	450
1253	960		2253	475		Extension for reply within third month	
1254	1,530		2254	740		Extension for reply within fourth month	
1255	2,080		2255	1,005		Extension for reply within fifth month	
1401	340		2401	168		Notice of Appeal	
1402	340		2402	168		Filing a brief in support of an appeal	500
1403	300		2403	148		Request for oral hearing	
1451	1,510		1451	1,510		Petition to institute a public use proceeding	
1452	110		2452	65		Petition to revive - unavoidable	
1453	1,370		2453	665		Petition to revive - unintentional	
1501	1,370		2501	665		Utility issue fee (or reissue)	
1502	490		2502	240		Design issue fee	
1503	680		2503	320		Plant issue fee	
1480	130		1480	130		Petitions to the Director	
1807	50		1807	50		Processing fee under 37 CFR 1.17 (q)	
1806	180		1806	180		Submission of Information Disclosure Stmt	
8021	40		8021	40		Recording each patent assignment per property (times number of properties)	
1809	780		2809	385		Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	780		2810	385		For each additional invention to be examined (37 CFR § 1.129(b))	
1801	780		2801	385		Request for Continued Examination (RCE)	
1802	900		1802	900		Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 950)

**SUBMITTED BY**

Name (Print/Type)	Patricia A. Vortugler	Registration No. (Attorney/Agent)	42,201	Telephone	(609) 734-6887
Signature	<i>Patricia A. Vortugler</i>	Date	December 9, 2005		

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